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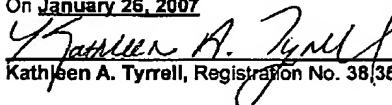
IN THE UNITED STATES PATENT AND TRADEMARK OFFICE

Attorney Docket No.: UT-0048
Inventors: Rao et al.
Serial No.: 10/502,224
Filing Date: May 17, 2005
Examiner: Sajjadi, Fereydoun Ghotb
Customer No.: 26259
Group Art Unit: 1633
Confirmation No.: 1620
Title: Pure Populations of Astrocyte
Restricted Precursor Cells and
Methods for Isolation and Use
Thereof

Certificate of Facsimile Transmission

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the date shown below.

On January 26, 2007



Kathleen A. Tyrrell, Registration No. 38,350

Commissioner for Patents
Alexandria, VA 22313-1450

Dear Sir:

Preliminary Amendment and Reply to Restriction Requirement

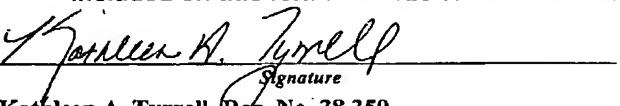
This Preliminary Amendment is responsive to the
Restriction Requirement dated January 10, 2006, setting a
one (1) month statutory period for response. Please enter
the following amendments and remarks into the record.

Amendments to the claims are reflected in the listing
of claims which begins on page 3 of this paper.

Attorney Docket No.: **UT-0048**
Inventors: **Rao et al.**
Serial No.: **10/502,224**
Filing Date: **May 17, 2005**
Page 2

Remarks begin at page 4.

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AMENDMENT TRANSMITTAL LETTER (Small Entity)				Docket No. UT-0048	
Applicant(s): Rao et al.					
Application No.	Filing Date	Examiner	Customer No.	Group Art Unit	Confirmation No.
10/502,224	May 17, 2005	Sajjadi, Fereydoun Ghotb	26259	1633	1620
Invention: Pure Populations of Astrocyte Restricted Precursor Cells and Methods for Isolation and Use Thereof					
<u>COMMISSIONER FOR PATENTS:</u>					
Transmitted herewith is an amendment in the above-identified application.					
<input checked="" type="checkbox"/> Applicant claims small entity status. See 37 CFR 1.27					
The fee has been calculated and is transmitted as shown below.					
CLAIMS AS AMENDED					
	CLAIMS REMAINING AFTER AMENDMENT	HIGHEST # PREV. PAID FOR	NUMBER EXTRA CLAIMS PRESENT	RATE	ADDITIONAL FEE
TOTAL CLAIMS	10 -	20 =	0	x \$25.00	\$0.00
INDEP. CLAIMS	1 -	3 =	0	x \$100.00	\$0.00
Multiple Dependent Claims (check if applicable) <input type="checkbox"/>					\$0.00
TOTAL ADDITIONAL FEE FOR THIS AMENDMENT					\$0.00
<input checked="" type="checkbox"/> No additional fee is required for amendment. <input type="checkbox"/> Please charge Deposit Account No. _____ in the amount of _____ <input type="checkbox"/> A check in the amount of _____ to cover the filing fee is enclosed. <input checked="" type="checkbox"/> The Director is hereby authorized to charge payment of the following fees associated with this communication or credit any overpayment to Deposit Account No. 50-1619 <input type="checkbox"/> Any additional filing fees required under 37 C.F.R. 1.16. <input type="checkbox"/> Any patent application processing fees under 37 CFR 1.17. <input type="checkbox"/> Payment by credit card. Form PTO-2038 is attached.					
WARNING: Information on this form may become public. Credit card information should not be included on this form. Provide credit card information and authorization on PTO-2038.					
 <i>Kathleen A. Tyrrell</i> <small>Signature</small>			Dated: <i>January 26, 2007</i>		
Kathleen A. Tyrrell, Reg. No. 38,350 Licata & Tyrrell P.C. 66 E. Main Street Marlton, New Jersey 08053 Telephone: (856) 810-1515 Facsimile: (856) 810-1454			I certify that this correspondence is being deposited with the United States Postal Service with sufficient postage as first class mail in an envelope addressed to "Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450" [37 CFR 1.8(a)] on _____ <small>(Date)</small>		
			<i>Signature of Person Mailing Correspondence</i>		
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LICATA & TYRRELL

JAN 26 2007

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CERTIFICATE OF TRANSMISSION BY FACSIMILE (37 CFR 1.8)

Applicant(s): Rao et al.

Docket No.
UT-0048

Application No.

10/502,224

Filing Date

May 17, 2005

Examiner

Sajjadi, Fereydoun Ghotb

Group Art Unit

1633

Invention: Pure Populations of Astrocyte Restricted Precursor Cells and Methods for Isolation and Use Thereof

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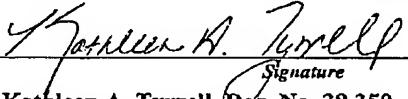
Kathleen A. Tyrrell

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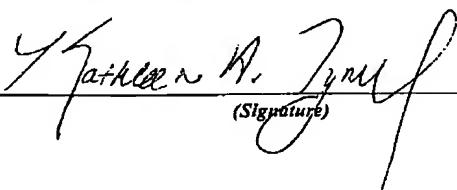
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Multiple Dependent Claims (check if applicable) <input type="checkbox"/>					
TOTAL ADDITIONAL FEE FOR THIS AMENDMENT					
\$0.00					
<input checked="" type="checkbox"/> No additional fee is required for amendment. <input type="checkbox"/> Please charge Deposit Account No. _____ in the amount of _____. <input type="checkbox"/> A check in the amount of _____ to cover the filing fee is enclosed. <input checked="" type="checkbox"/> The Director is hereby authorized to charge payment of the following fees associated with this communication or credit any overpayment to Deposit Account No. 50-1619 <input type="checkbox"/> Any additional filing fees required under 37 C.F.R. 1.16. <input type="checkbox"/> Any patent application processing fees under 37 CFR 1.17. <input type="checkbox"/> Payment by credit card. Form PTO-2038 is attached.					
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<i>Dated: January 26, 2007</i>					
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Application No. 10/502,224	Filing Date May 17, 2005	Examiner Sajjadi, Fereydoun Ghotb	Group Art Unit 1633	
Invention: Pure Populations of Astrocyte Restricted Precursor Cells and Methods for Isolation and Use Thereof				
<p>I hereby certify that this <u>Preliminary Amendment and Reply to Restriction Requirement</u> <small>(Identify type of correspondence)</small> is being facsimile transmitted to the United States Patent and Trademark Office (Fax. No. <u>(571) 273-8300</u>) on <u>January 26, 2007</u> <small>(Date)</small></p>				
<p><u>Kathleen A. Tyrrell</u> <small>(Typed or Printed Name of Person Signing Certificate)</small></p>  <p style="text-align: center;"><small>(Signature)</small></p>				
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January 26, 2007

TO: Sajjadi, Fereydoun Ghotb**GROUP: 1633****FAX NUMBER: (571) 273-8300****ATTORNEY DOCKET NO.: UT-0048****SERIAL NO.: 10/502,224****FILED: May 17, 2005****NUMBER OF PAGES: -12-**
(including this sheet)**MESSAGE:**

Attached please find Amendment Transmittal Letter (in duplicate), Preliminary Amendment and Reply to Restriction Requirement and Certificate of Transmission by Facsimile.

Kathleen A. Tyrrell, Reg. No. 38,350

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